

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

## FILED EFFECTIVE

12 JUN - 1 PM 2: 41

SECRETARY OF STATE

	STATE OF IDAHO
1. The name of the limited liability of	company is:
<u> </u>	MOLER AVIATION, LLC
2. The complete street and mailing a 974 TINDALL AVENUE, MOUNTAIN F	addresses of the initial designated office: HOME, IDAHO 83647
·	
(Mailing Address, if different than street address	s)
3. The name and complete street ac	ddress of the registered agent:
DAVID N. MOLER	974 TINDALL AVENUE, MOUNTAIN HOME, ID 83647
(Name)	(Sireet Address)
DAVID N. MOLER	Address 974 TINDALL AVENUE, MOUNTAIN HOME, ID 83647
5. Mailing address for future corresp 974 TINDALL AVENUE, MOUNTAIN F	
6. Future effective date of filing (opt	tional):
Signature of a manager, member	or authorized
Signature DAVID N. MOLER	Secretary of State use only
Signature	IDAHO SECRETARY OF STATE  06/01/2012 05:00  CK: 6147 CT: 271044 BH: 132657

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